	Alls
PTO/SB/17 (10-08) Approved for use through 06/30/2010. OMB 0651-0032 d Trademark Office; U.S. DEPARTMENT OF COMMERCE f information unless it displays a valid OMB control number	1/8
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				respond to a collection of information unless it displays a valid OMB control number  Complete if Known						
Fees pursuant to the Consolidated Appropriations Act, 2005 (H.R. 4818).  FEE TRANSMITTAL			Application Number		10/623,646-Conf. #4737					
			Filing Date		ly 22, 2003					
			First Named Inve	entor Cl	Chia-Chen CHEN					
For FY 2009				Examiner Name	S.	S. A. Broome				
Applicant claims small entity status. See 37 CFR 1.27				Art Unit 2628						
TOTAL AMOUNT OF PAYMENT (\$) 540.00				Attorney Docket No. 0941-0794P						
METHOD OF PAYMENT (check all that apply)										
Check Credit Card Money Order None Other (please identify):										
Tx Deposit Account Deposit Account Number: 02-2448 Deposit Account Name: Birch, Stewart, Kolasch & Birch, LLP										
For the above-identified deposit account, the Director is hereby authorized to: (check all that apply)										
x Charge fee(s) indicated below Charge fee(s) indicated below, except for the filing fee										
Charge any additional fee(s) or underpayments of fee(s) under 37 CFR 1.16 and 1.17										
FEE CALCULATION										
1. BASIC FILING		EXAMIN	ATION FEE	S						
	F	ILING		SE	ARCH FEES	EXAMINA	TION FEES			
Application Typ	ne Fee		nall Entity Fee (\$)	Fee (S	Small Entity Fee (\$)	Fee (\$)	Small Entity Fee (\$)	Fees P	aid (\$)	
Utility	33		165	540	<del>-</del>	220	110			
Design	22		110	100	50	140	70			
Plant	22		110	330		170	85			
Reissue	33	-	165	540	270	650	325			
Provisional	22		110	0	0	0	0			
2. EXCESS CLAI								-	Small Entity	
Fee (\$) Fee (\$)										
Each claim over 20 (including Reissues) 52 26										
Each independent claim over 3 (including Reissues)						220	110			
Multiple dependent claims							390	195		
Total Claims Extra Claims Fee (\$)			F	ee Paid (\$) Multiple Dep						
		x for, if great	er than 20			<u>Fee</u>	( <u>4)</u>	Fee Paid (\$	1	
HP ≈ highest number of total claims paid for, if greater than 20.  Indep. Claims Extra Claims Fee (\$) Fe				ee Paid (\$)				_		
3	or HP =	_ × _								
HP = highest numb	er of independent clai	ns paid for	r, if greater tha	n 3.						
3. APPLICATION	SIZE FEE					~-				
If the specification and drawings exceed 100 sheets of paper (excluding electronically filed sequence or computer										
listings under 37 CFR 1.52(e)), the application size fee due is \$270 (\$135 for small entity) for each additional 50 sheets or fraction thereof. See 35 U.S.C. 41(a)(1)(G) and 37 CFR 1.16(s).										
Total Sheets Extra Sheets Number of each additional 50 or fraction thereof Fee (\$) Fee Paid (\$)										
100 = /50 = (round up to a whole number) x =										
4. OTHER FEE(S)  Fees Paid (\$)										
Non-English Specification, \$130 fee (no small entity discount)										
Other (e.g., la	te filing surcharg	e): <u>140</u>	1 Notice of	appea	al		<u> </u>	54	0.00	
SUBMITTED BY										
Signature	WO.	bis			Registration No. (Attorney/Agent)	43,368	Telephone	(703) 20	5-8000	
Name (Print/Type)	Paul C. Lewis						Date	November	30, 2009	
Cheng-Kang Hsu Reg. No. 61,007										
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Reg. No. 61,007

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